## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000084671 (1)

NORRIS & C. TRUCKING, INCORPORATED

## **FILED** Jan 22 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				(100):201   (10 :01)  (101: (10 :1)	.MELE BREEF 18121 USB18	1 Willia 140 BS 145   180
4500 NORTH WEST 11TH ST. 4500 NORTH WEST 11TH ST.						
LAUDERHILL FL 33313 LAUDERHILL FL 33313			DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualified		, <u> </u>
				09/29/1997	•	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number 2.0	15	Applied For
21 USOD NW 1151	26 SAME AS	- Ala	OE	65-078		Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	-		1		B.75 Additional
22	27			5. Certificate of Status Desired		Fee Required
City & State			6. Election Campaign Financing		5.00 May Be	
23 LAWEL AIN	28			Trust Fund Contribution		Added to Fees
Zip Country	Zip	Country	<i>'</i>	8. This corporation owes or has p		
9. Name and Address of Curre		30		Personal Property Tax due June 10. Name and Address of New Re		
FRANCIS. STEDMAN G		81	Name	10. Name and Address of New In	sgistered Agen	
4500 NORTH WEST 11TH ST.						
LAUDERHILL FL 33313		82	Street Addre	ss (P.O. Box Number is Not Accepta	ble)	
		83				
		<u> </u>				
		84	City		FL 85	Zip Code
11. Pursuant to the provisions of Sections 607.05	02 and 607.1508, Fiorida Statutes	s, the above	a-named corpo	ration submits this statement for the		nging its registered
Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig	e of Florida. Such change was au nations of, Section 607,0505. Flor	thorized by	the corporation	on's board of directors. I hereby acce	pt the appointm	ient as registered
SIGNATURE & STATE PLA						
Signature, typed or printed name of registered ag		Registered Age	nt signature required		DATE Ø/ .	12.98
	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
TITLE RESIDENT	☐ DELETE	1.1 TITLE	ĺ		□ 0	Change L Addition
	weis	1.2 NAME				
STREET ADDRESS 4-5 IN W 1/5 T CITY-ST-ZIP LAUGER HIM FL33313		1.3 STREET ADDRESS				
TITLE SECRETARY	S S S Z Z	1.4 CITY - S 2.1 TITLE	T-ZIP			hange Addition
NAME CHARMINE LIFERA.		2.2 NAME				nange
STREET ADDRESS 4500 NW (157		2.3 STREET	AUUBESS			
CITY-ST-ZIP LAUDER Hill FL333	3/3	2. 4 CITY-S				İ
TITLE TOEASURER .	DELETE	3.1 TITLE	11-21:			hange Addition
LUNG 1 JAPOKN PRANCES	_	3.2 NAME			_	
STREET ADDRESS 4500 NWUS,		3.3 STREET	ADDRESS			
CITY-ST-ZIP LAUDER Hill FL33	3/3	3.4. CITY - S	ł			
TITLE	☐ DELETE	4.1 TITLE	*		C	hange Addition
NAME		4. 2 NAME				
STREET ADDRESS		4,3 STREET	ADDRESS			ļ
CITY-ST-ZIP		4.4 CITY - ST	r-zip			
TITLE	☐ DELETE	5.1 TITLE	ŀ		C	hange
NAME		5.2 NAME				
STREET ADDRESS		5,3 STREET	ADDRESS			
CITY-ST-ZIP		5.4 CITY - S1	-ZIP			
TITLE	☐ DELETE	6.1 TITLE			☐ Ct	hange L Addition
NAME		6.2 NAME				
STREET ADDRESS		6.3 STREET	ADDRESS			
CITY-ST-ZIP	10 71 70	6.4 CITY-ST	- ZIP			
14. I hereby certify that the information supplied w	ith this filing does not qualify for	tne exempt	ion stated in Si	ection 119.07(3)(i), Florida Statutes. I	further certify th	at the information

оп вто вприм тероп от supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.